

# ● PRINTER RUSH ●

## (PTO ASSISTANCE)

Application : <u>09/650118</u>	Examiner : <u>D'Agosta, S</u>	GAU : <u>2683</u>
From: <u>J. J. C</u>	Location: <u>IDC</u> FMF FDC	Date: _____

Tracking #: \_\_\_\_\_ Week Date: \_\_\_\_\_

DOC CODE	DOC DATE	MISCELLANEOUS
<input type="checkbox"/> 1449	_____	<input type="checkbox"/> Continuing Data
<input type="checkbox"/> IDS	_____	<input type="checkbox"/> Foreign Priority
<input type="checkbox"/> <u>CLM</u>	_____	<input type="checkbox"/> Document Legibility
<input type="checkbox"/> IIFW	_____	<input type="checkbox"/> Fees
<input type="checkbox"/> SRFW	_____	<input checked="" type="checkbox"/> Other <u>AP. B (10/27/2004)</u>
<input type="checkbox"/> DRW	_____	<u>re: CLAIMS</u>
<input type="checkbox"/> OATH	_____	
<input type="checkbox"/> 312	_____	
<input type="checkbox"/> SPEC	_____	

[RUSH] MESSAGE: Improper Dependency: Original claim 13 depends upon  
cancelled original claim 12. Please Resolve.

Thank you,  
AGC

[XRUSH] RESPONSE: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**INITIALS:**

NOTE: This form will be included as part of the official USPTO record, with the Response document coded as XRUSH.  
 REV 10/04